Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

ii		CLAIMS A	S FILED	- PART	1	•	SMALL	. ENTITY		OTHE	R THAN
	-: A1946		(Column	n 1)	(Colu	umn 2)	TYPE		OF		ENTITY
T	OTAL CLAIMS	<u> </u>	17				RATE	FEE	7	RATE	FEE
FC	OR		NUMBER	FILED	NUMF	BER EXTRA	BASIC F	EE 385.00	OR	BASIC FEE	770.00
тс	OTAL CHARGE	ABLE CLAIMS	7 mi	inus 20=	•		XS 9=	=	OR	X\$18=	
	DEPENDENT C		1 0	ninus 3 =			X43=		OR	7/00	
ML	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT	•			+145=	=	OR		
* If	the difference	e in column 1 is	, less than ze	ero, enter	r "0" in ‹	column 2	TOTAL		OR	` <b></b>	770
	C	CLAIMS AS A	AMENDER	D - PAR	ÆΠ			· <u> </u>	J -	OTHER	
		(Column 1)		(Colum	mn 2)	(Column 3)	SMAL	L ENTITY	OR	SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IBER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL .FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	X\$ 9=	T _	OR	X\$18=	
AME	Independent	* TATION OF M	Minus	***	- ~: AIM	=	X43=		OR	X86=	
<u> </u>	HIROT FULUE	ENTATION OF MU	JEHPLE DE-	PENDENT	CLAtivi		+145=		OR	+290=	
							TOTA	AL .		TOTAL	
		(Column 1)		(Colum	mn 2)	(Column 3)	ADDIT. FE	Ξ	JC ,	ADDIT. FEE	
£		CLAIMS		HIĞHE	EST			ADDI-	1 /		ADDI-
AMENDMENT B	.!	REMAINING AFTER AMENDMENT		PREVIOUS PAID F	DUSLY	PRESENT EXTRA	RATE	TIONAL		RATE	TIONAL FEE
NDN	Total	*	Minus	**		=	X\$ 9=	T	OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus	PENDENT (	OL AIRA	<u> -</u>	X43=		OR	X86=	
_	FINOI FILEGE.	NIAHON OF ME	ILIPLE DE	ENDEN	CLAnvi		+145=	1	OR	+290=	
	•						TOTAL			TOTAL	•
-		(Column 1)		(Colum		(Column 3)	ADDIT. FEE	: <b></b>	, , , , , , , , , , , , , , , , , , ,	ADDIT. FEE	
MENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	EST BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		<u>:</u>	X\$ 9=		OR	X\$18=	
AME		<u> </u>	Minus	***		=	X43=	1	1 F	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1 = 2 = 1	OR		
- If	the entry in colur	mn 1 is less than the	e entry in colur	mn 2. write '	"O" in col	umn 3 .	+145=		OR	+290=	
** 11	f the "Highest Nurr	mber Previously Pai mber Previously Pai	aid For" IN THIS	S SPACE is I	less than	n 20, enter "20." n 3. enter "3."	TOTAL ADDIT. FEE	لــــا		TOTAL ADDIT. FEE	
	I Hall House	1160		J UI 17-UL	CD::	. I J. Giller J.		ppropriate box			